scores", each clustering a defined set of questions. **RESULTS:** (2002 figures in brackets): Samples did not differ significantly in structure. The 16 practices recruited n = 1639 patients (n = 1826), 50.9% women (55.0); mean age 63.6 years (62.4). Comparing 2004 with 2002 it is demonstrated that 5 practices showed overall improvement in all dimensions, 3 practices improved in some, 4 practices improved and decreased, while 4 maintained steady state. Patients of one practice reported much more problems in all dimensions in 2002 than on average. In 2004, the practice presents with only "praxis organisation" being still an issue for patients (+37%). This practice demonstrated an overall better performance based on improvements in 8 out of 13 scales. Problem scores dropped (i.e. improvement) especially interpersonal communication dimensions, i.e. patient-physician relationship (–56%), co-management (–32%), involvement of family members (–54%), discussion with other patients (–41%). **CONCLUSION:** Assessing patient satisfaction over time is one tool to generate a platform for quality assurance in oncological care. The PASCOQ® questionnaire is a tool to assess not only status quo but is also feasible to detect changes in patients' satisfaction with physicians, staff, environment as well as side effects and supportive medication.

FIBROMYALGIA

PFM1

FIBROMYALGIA SYNDROME: A PORTUGUESE EPIDEMIOLOGICAL SURVEY

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OBJECTIVES: To assess the estimated prevalence of possible fibromyalgia sufferers among the general adults population in Portugal using a screening questionnaire, the LFES-SQ developed by White. **METHODS:** This questionnaire was administrated to a random community sample of 500 persons interviewed by telephone and positive responders to the screening questionnaire were classified as "pain sufferers". Using a sample of patients coming to Rheumatologist departments we administrated to them the same screening questionnaire and we diagnosed this entire sample to see if they were fibromyalgia sufferers (using the 1990 ACR criteria). Once we had calculated the ratio between patients "positive" to the screening questionnaire and the number of patients really diagnosed with fibromyalgia, we applied this ratio to our population of "pain sufferers" and therefore obtain an estimate of the prevalence of possible fibromyalgia sufferers. It is important to note that we worked on two different populations. **RESULTS:** In Portugal following the hospital survey the results were the following: 225 interviewed patients (191 women, 34 men) among them 154 were screened positive (136 and 18) and 51 cases of fibromyalgia (50 and 1) therefore multiplication factors of possible fibromyalgia patients VS number of positive = Total fibromyalgia cases in Lisboa / Number of Patients screened positive i.e. . . . multiplication factor for the total population = 51/154 = 0.331; for women = 50/136 = 0.368 and for men = 1/18 = 0.056. Once those ratio were applied to our random community representative sample of 500 persons we obtained the following: an estimated prevalence of FMS in Portugal of 6.09% of the total population, 8.76% of women and 0.69% of men. **CONCLUSION:** Those data are higher than the ones obtained in the White study or in the published prevalence of fibromyalgia in the literature, but they allow us to assess an estimated prevalence of fibromyalgia.

PFM2

FIBROMYALGIA SYNDROME: AN ITALIAN EPIDEMIOLOGICAL SURVEY

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OBJECTIVE: To assess the estimated prevalence of possible Fibromyalgia (FM) sufferers among the general adults population in Italy using the LFES-SQ, a screening questionnaire developed by White. **METHODS:** This questionnaire was administrated to a random community sample of 1000 persons interviewed by telephone and positive responders to the screening questionnaire were classified as "pain sufferers". Using a ratio calculated in Portugal between patients "positive" (+) to the screening questionnaire and the number of patients really diagnosed with FMS, we applied this ratio to our population of "pain sufferers" and therefore obtain an estimate of the prevalence of possible fibromyalgia sufferers in Italy, please note that we worked on two different populations. The ratio was calculated using a sample of patients in Lisboa, to whom we administrated the same screening questionnaire and we diagnosed this entire sample to see if they were FMS sufferers (using the 1990 ACR criteria). **RESULTS:** In Portugal following the hospital survey we were able to calculate the following ratios: Multiplication factors of possible FMS patients VS number of (+) = Total FM cases in Lisboa / Number of Patients screened (+), i.e. . . . multiplication factor for the total population = 51/154 = 0.331; multiplication factor for women = 50/136 = 0.368; multiplication factor for men = 1/18 = 0.056. Once those ratio were applied to our random sample of 1000 persons we obtained an estimated prevalence of FMS in Italy of 4.17% of the total population, 6.99% of women and 0.31% of men. **CONCLUSION:** Those data are higher than those obtained in the White study or in the published prevalence of FMS in the literature, but they allow us to assess an estimated prevalence of FMS. The next steps will be to calculate local multiplication factors of FMS in Italy in order to improve those estimates and to generalise this survey in Europe.

PFM3

CROSS-SURVEY OF FRENCH AND PORTUGUESE GENERAL PRACTITIONERS GLOBAL MANAGEMENT OF FIBROMYALGIA

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OBJECTIVE: To compare the management of fibromyalgia amongst French and Portuguese General Practitioners (GPs). **METHODS:** A questionnaire with a prepaid envelope was sent to a sample of 10,000 GPs in France and to all practicing GPs (n = 8399) in Portugal. This questionnaire was organized in six main sections: the characteristics of the physician's professional practice, the physician's opinion on fibromyalgia, the main symptoms of fibromyalgia, diagnosis criteria, treatments of fibromyalgia, sources of knowledge on fibromyalgia. **RESULTS:** A total of 1130 French GPs (response rate: 11.3%) and 337 Portuguese GPs (response rate: 4%) returned the questionnaire. In France 66% are male with an average age of 47, whereas in Portugal 52% are male with an average age of 50. The profile of the respondents is similar in age and gender to the average national profile. Thirty-three percent of French GPs and 29.5% of the Portuguese ones affirm that fibromyalgia is a disease; 63% and 68% respectively claim it is a symptom and it is only for 2% of French and 2.5% of the Portuguese GPs that fibromyalgia does